

Notley High School & Braintree Sixth Form

Supporting Students with Medical Conditions Policy

Implementation Date:	May 2024
Last reviewed:	May 2024
Next review date	May 2026
Ratified Committee	May 2024
Designated Postholder	Deputy Headteacher

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1. Aims

This policy aims to ensure that:

- Students, staff and parents/carers understand how our school will support students with medical conditions;
- Students with medical conditions are properly supported to allow them to access the same education as other students, including school trips and sporting activities.

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained;
- Making staff aware of a student's condition, where appropriate;
- Making sure there are cover arrangements to ensure someone is always available to support students with medical conditions;
- Providing supply teachers with appropriate information about the policy and relevant students;
- Developing and monitoring individual healthcare plans (IHCPs).

The named person with responsibility for implementing this policy is Melanie Townsend, Deputy Headteacher.

2. Legislation and statutory responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting students at their school with medical conditions.

It is also based on the Department for Education's statutory guidance: [Supporting students at school with medical conditions](#).

This policy also complies with our funding agreement and articles of association.

3. Roles and responsibilities

3.1 The governing board

The governing board has ultimate responsibility to make arrangements to support students with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

3.2 The headteacher

The headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation;
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHCPs), including contingency and emergency situations;
- Take overall responsibility for the development of IHCPs;
- Make sure that school staff are appropriately insured and aware that they are insured to support students in this way;
- Contact the school nursing service in the case of any student who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse;
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up-to-date.

3.3 Staff

Supporting students with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to students with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support students with medical conditions will receive sufficient and suitable training and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of students with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

3.4 Parents/carers Parents/carers

will:

- Provide the school with sufficient and up-to-date information about their child's medical needs;
- Be involved in the development and review of their child's IHCP and may be involved in its drafting;
- Carry out any action they have agreed to as part of the implementation of the IHCP e.g. provide medicines and equipment.

3.5 Students

Students with medical conditions will often be best placed to provide information about how their condition affects them. Students should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHCPs. They are also expected to comply with their IHCPs.

3.6 School nurses and other healthcare professionals

Our school nursing service may notify the school when a student has been identified as having a medical condition that will require support in school. This will be before the student starts school, wherever possible.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school nurses and notify them of any students identified as having a medical condition.

4. Equal opportunities

Our school is clear about the need to actively support students with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

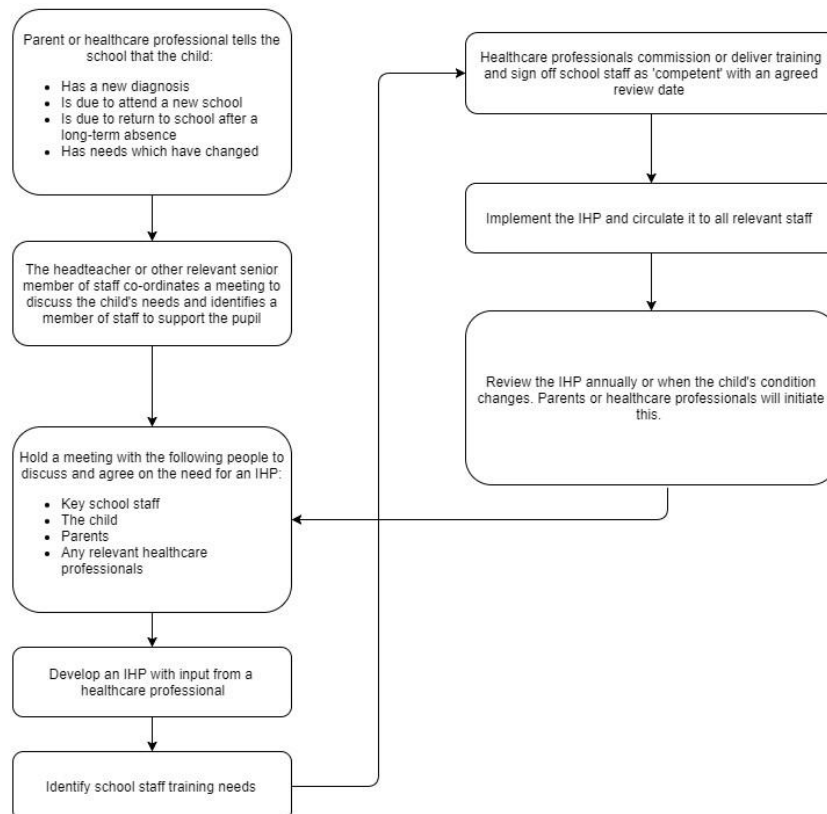
The school will consider what reasonable adjustments need to be made to enable these students to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any reasonable steps needed to ensure that students with medical conditions are included. In doing so, students, their parents/carers and any relevant healthcare professionals will be consulted.

5. Being notified that a child has a medical condition

When the school is notified that a student has a medical condition, the process outlined below will be followed to decide whether the student requires an IHCP.

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for students who are new to our school.



6. Individual healthcare plans (IHCP)

The headteacher has overall responsibility for the development of IHCPs for students with medical conditions. This has been delegated to the Medical Administrator.

Plans will be reviewed at least annually, or earlier if there is evidence that the student's needs have changed.

Plans will be developed with the student's best interests in mind and will set out:

- What needs to be done;
- When;
- By whom.

Not all students with a medical condition will require an IHCP. It will be agreed with a healthcare professional and the parents/carers when an IHCP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents/carers and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the student's specific needs. The student will be involved wherever appropriate.

IHCPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a student has SEND but does not have a statement or EHC plan, the SEND will be mentioned in the IHCP. The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed.

The governing board and relevant staff will consider the following when deciding what information to record on IHCPs:

- The medical condition, its triggers, signs, symptoms and treatments;
- The student's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons;
- Specific support for the student's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- The level of support needed, including in emergencies. If a student is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring;
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the student's medical condition from a healthcare professional, and cover arrangements for when they are unavailable;
- Who in the school needs to be aware of the student's condition and the support required;
- Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the student during school hours;
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the student can participate, e.g. risk assessments;
- Where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the student's condition;
- What to do in an emergency, including who to contact, and contingency arrangements.

7. Managing medicines

Prescription and non-prescription medicines will only be administered at school:

- When it would be detrimental to the student's health or school attendance not to do so and
- Where we have parents'/carers' written consent

The only exception to this is where the medicine has been prescribed to the student without the knowledge of the parents/carers.

Students under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a student any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents/carers will always be informed.

The school will only accept prescribed medicines that are:

- In-date;
- Labelled;
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage.

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Students will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to students and not locked away.

7.1 Controlled drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

All controlled drugs are kept in a secure double-locked cupboard and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

7.2 Students managing their own needs

Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents/carers and it will be reflected in their IHCPs.

Students will not be allowed to carry their own medicines unless detailed in the IHCP. See Appendix 3 for information about relevant devices. Staff will not force a student to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHCP and inform parents/carers so that an alternative option can be considered, if necessary.

7.3 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the student's IHCP, but it is generally not acceptable to:

- Prevent students from easily accessing their inhalers and medication, and administering their medication when and where necessary;
- Assume that every student with the same condition requires the same treatment;
- Ignore the views of the student or their parents/carers;
- Ignore medical evidence or opinion (although this may be challenged);
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHCPs;
- If the student becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- Penalise students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- Prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their student, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs;

- Prevent students from participating, or create unnecessary barriers to students participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany their child;
- Administer, or ask students to administer, medicine in school toilets.

8. Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All students' IHCPs will clearly set out what constitutes an emergency and will explain what to do.

If a student needs to be taken to hospital, staff will stay with the student until a parent/carer arrives, or accompany the student to hospital by ambulance.

9. Training

Staff who are responsible for supporting students with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHCPs. Staff who provide support to students with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Deputy Headteacher. Training will be kept up-to-date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the students; • Fulfil the requirements in the IHCPs;
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

10. Record keeping

The governing board will ensure that written records are kept of all medicine administered to students. Parents will be informed if their student has been unwell at school.

IHCPs are kept in a readily accessible place which all staff are aware of.

11. Liability and indemnity

The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

The school has in place Public Liability insurance (policy number KSC-242045-9583) with a limit of indemnity of £25,000,000 for any one claim; and also Governors' Liability (Professional Indemnity cover) with a limit of £5,000 000 for any one claim.

12. Complaints

Parents/carers with a complaint about their child's medical condition should follow the complaints process as outlined in the Complaints Policy.

Informal Stage: Complaint heard by Staff member

Stage 2: Complaint heard by Headteacher

Stage 1: Complaint heard by Governing Committee Complaints Appeal Panel

13. Monitoring arrangements

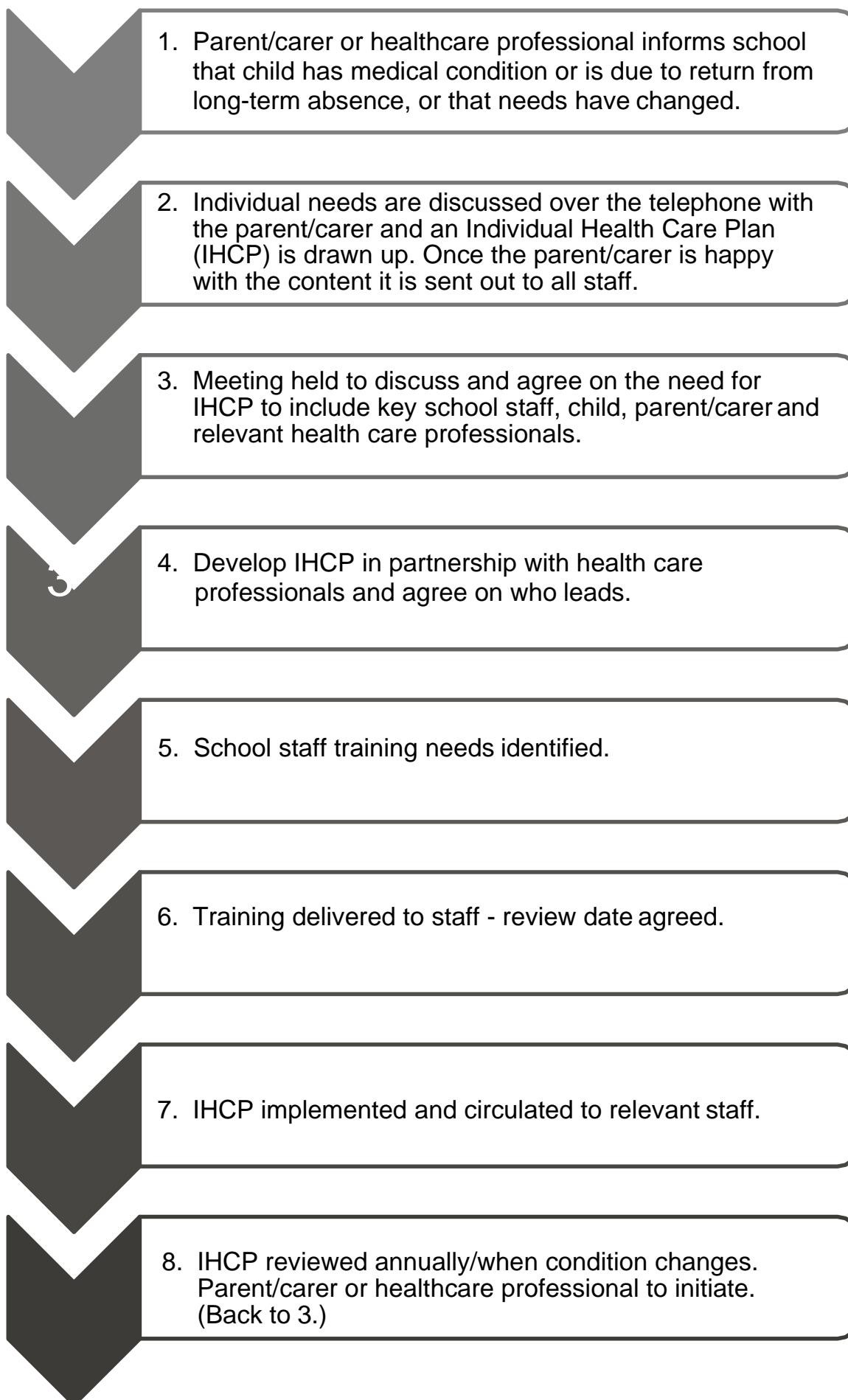
This policy will be reviewed and approved by the governing committee every 2 years.

14. Links to other policies

This policy links to the following policies:

- BAT Accessibility plan
- BAT Complaints Policy
- Equality information and objectives
- BAT First aid
- BAT Health and safety
- Safeguarding
- BAT Special Educational Needs Policy and Information Report

Appendix 1 – Individual healthcare plan implementation procedure



Appendix 2 – Individual Health Care Plan

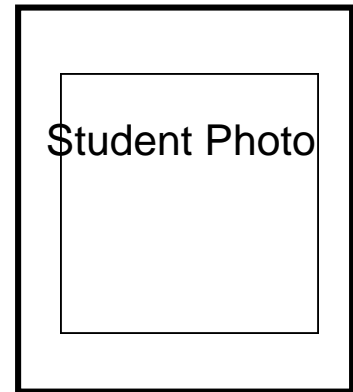
CONFIDENTIAL INDIVIDUAL HEALTH CARE PLAN

Student's name:

Tutor group:

Date of birth: DD/MM/YYYY

Diagnosis or condition(s):



Additional information:

Emergency information:

Staff actions required:

Staff MUST call for an ambulance in these circumstances clearly stating that

Minor incident information and staff action:

Daily care requirements:

Please note:

CONFIDENTIAL INDIVIDUAL HEALTH CARE PLAN

Student's name:	
Tutor Group:	
Home Address:	

Parent/Carer:	(Name and relationship to child)
Contact info:	

Other contacts:	

GP:	
Community Nurse:	
Other health Professionals:	

Who is responsible for providing support in school:	
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Staff trained in administration of (specialist training info if applicable): (Including date training undertaken)	

CONFIDENTIAL

Individual Health Care Plan (IHCP)

Student's name and tutor group

All medication taken (as of: date)

Additional info:

IHCP developed with:

I/we can confirm that this medical plan is correct as of today, and I/we accept full responsibility for informing the school of any changes/update to this plan.

•

I/we give consent for the school to administer medication as detailed in this plan, if applicable, and will advise the school as soon as possible to any changes in this medication.

•

I/we do/do not give consent for a photo of my child to be displayed, in relation to their medical condition in: Medical Room, Staff Rooms, Student Services office.

I/we give permission for my/our personal information and my/our child's medical information to be shared with paramedic/ambulance staff in the case of an emergency.

I

Name:	Parent/Carer
Signature:	Date:

Medical plan review required: September YYYY

Appendix 3

NOTLEY HIGH SCHOOL & BRAINTREE SIXTH FORM FIRST AID POLICY First Aid Areas

Medical Room (Student Services, main school)

Sixth Form Office (Braintree Sixth Form building).

First Aiders

Medical Administrator/Primary first aider. (Key stages 3/4) Pastoral Manager (Key stage 5).

All Pastoral Managers and various other members of staff as deemed necessary. Specialist training will be undertaken as deemed necessary.

Medicines

Parents/carers must inform the school of any medical conditions relating to their child, which may affect them whilst they are in school, or may require the administration of medication during school time.

All medication needs to be supplied by the parent/carer, and a medical consent form needs to be signed. Any prescription medicine must be supplied in the labelled prescription box.

Any out-of-date medicines held will be disposed of safely at the end of each half term. The school has a right to refuse to administer medication.

Individual Health Care Plan (IHCP)

Parents/carers must inform the school of any serious medical conditions relating to their child, and supply the school with a copy of the health plan issued by the doctor. The school will draw up an IHCP to advise teachers/staff.

Parents/carers will be able to amend the plan at any time, and are responsible for ensuring the plan is up-to-date

Inhalers

Prescription Inhalers should be carried by each student who needs them. They should be clearly marked with the student's name and tutor group.

Government policy allows the school to purchase spare Salbutamol inhalers for emergency use, by students who are on the school's asthma register. Any other emergencies will be dealt with by telephoning 999, as per the school's normal procedures.

In order for a child to be on the asthma register and have access to an emergency use inhaler, an asthma card and a consent form need to be signed. This consent will be valid for the academic year. See appendix 4.

Adrenalin Pens

A list of students at risk of anaphylaxis is kept and emailed to all staff. Adrenaline pens for each student and staff are kept in the Medical Room, in clearly labelled containers. It is the parents/carers/students responsibility to ensure the adrenaline pens held are in date. An IHCP will be drawn up.

Students may keep an adrenalin pen on them, and are solely responsible for keeping it safe.

Teachers taking students on school trips are responsible for collecting the adrenaline pens and returning them to the medical room when arriving back at school.

Diabetes

A list of students with diabetes is kept and is communicated to all staff as well as being available on SharePoint. A glucose monitoring kit, insulin pen and other necessary supplies for each student is kept in the Medical Room, in clearly labelled containers. It is the parents'/carers'/students' responsibility to ensure that we have all necessary supplies and equipment. An Individual Health Care Plan will be drawn up.

Students should keep a glucose monitoring kit and the necessary supplies to deal with hypoglycaemia with them during the school day. They can test their blood-glucose levels during lessons and self-administer if necessary. They must inform their teacher if this occurs and a first aider will check on them.

Students will test their sugar levels in the Medical Room before lunchtime and take any required insulin injection. This will be in the presence of a first aider. They may attend the Medical Room at any other time should they feel the need.

Students will be responsible for their own diabetic kit when on school trips unless parents/carers request otherwise. A first aider must be present when a student tests their glucose level and injects their insulin.

Minor injuries/accidents/incidents

These will be dealt with in accordance to the first aid training.

Serious injuries/accidents/incidents

These will be dealt with in accordance to the first aid training, and parents/carers will be notified by telephone. An ambulance will be called if need be.

Splinters

A first aider may carefully remove splinters with tweezers, if it is easily accessible. The area will then be cleaned and a plaster applied if necessary. If the splinter is deep, on a joint or appears infected it will be covered with a plaster so the parent/carer can deal with it at home.

School Trips and Visits

A first aid kit is taken on all school trips and visits. Parents/carers will be required to complete a consent form for each trip ensuring all medical information is up-to-date and accurate.

School Asthma Card

To be filled in by the parent/carer

Child's name

Date of birth

Address

Parent/carer's name

Telephone – home

Telephone – work

Telephone – mobile

Doctor/nurse's name

Doctor/Nurse's telephone

This card is for your child's school. **Review the card at least once a year and remember to update or exchange it for a new one if your child's treatment changes during the year.** Medicines should be clearly labelled with your child's name and kept in agreement with the school's policy.

Reliever treatment when needed

For wheeze, cough, shortness of breath or sudden tightness in the chest, give or allow my child to take the medicines below. After treatment and as soon as they feel better they can return to normal activity.

Medicine	Parent/carer's signature
<input type="text"/>	<input type="text"/>

Expiry dates of medicines checked

Medicine	Date checked	Parent/carer's signature
<input type="text"/>	<input type="text"/>	<input type="text"/>

What signs can indicate that your child is having an asthma attack?

Parent/carer's signature

Date

Does your child tell you when he/she needs medicine?

Yes No

Does your child need help taking his/her asthma medicines?

Yes No

What are your child's triggers (things that make their asthma worse)?

Does your child need to take medicines before exercise or play?

Yes No

If yes, please describe below

Medicine	How much and when taken
<input type="text"/>	<input type="text"/>

Does your child need to take any other asthma medicines while in the school's care?

Yes No

If yes please describe below

Medicine	How much and when taken
<input type="text"/>	<input type="text"/>

Dates card checked by doctor or nurse

Date	Name	Job title	Signature
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

What to do in an asthma attack

- 1 Make sure the child takes one to two puffs of their reliever inhaler, (usually blue) preferably through a spacer
- 2 Sit the child up and encourage them to take slow steady breaths
- 3 If no immediate improvement, make sure the child takes two puffs of reliever inhaler, (one puff at a time) every two minutes. They can take up to ten puffs
- 4 If the child does not feel better after taking their inhaler as above, or if you are worried at any time, call 999 for an ambulance. If an ambulance does not arrive within ten minutes repeat step 3.

The Asthma UK Helpline - Here when you need us

0800 121 62 44 www.asthma.org.uk/helpline
9am–5pm, Monday–Friday

www.asthma.org.uk



Appendix 5 – Medicine Administration Consent Form

**Notley High School & Braintree Sixth Form
Medicine Administering Consent Form – 2023/24**

**All medication supplied must be in its box with the information leaflet.
Please see the Handbook for Parents and Carers for full guidance on medications held in school.**

Student's Full Name: Tutor Group:

Address:

Medical condition/illness: headache/period pains (delete if not applicable)

Medical condition/illness (other):

Name/Type of Medication:

Date treatment started:

Duration of treatment:

Frequency/timing of dosage:

Additional instructions/side effects that the school needs to know about:

.....

Emergency Contacts:

1. Name:

Relationship to child:

Daytime telephone no.:

2. Name:

Relationship to child:

Daytime telephone no.:

• **Declaration:**

1. The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school's policy.
2. **I will inform the school immediately, in writing, if there is any change to the dosage or frequency of the medication or if the medicine no longer needs to be taken.**
3. I accept the school has a right to refuse to administer medication.

Name:

Relationship to child:

Signed: Date:.....

Please note all medication and relevant paperwork is kept in a locked cabinet. Access is restricted to first aiders. All paperwork will be shredded at the end of the course of medication or at the end of the academic year. Paperwork will be stored in line with GDPR.

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Appendix 6 – Contacting Emergency Services

Contacting Emergency Services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked. •

Your telephone number – **01376 556300**

- Your name.
- Your location as follows: **Notley High School & Braintree Sixth Form, Notley Road, Braintree, Essex, CM7 1WY.**
- The exact location of the patient within the school.
- The name of the child and a brief description of their symptoms.
- The best entrance to use and state that the crew will be met and taken to the patient.

Arrange for a member of staff to meet the ambulance at the front gates.

Write a report on what you did and ensure that the Medical Administrator, Deputy Headteacher and Headteacher receive a copy the same day.

Appendix 7 – Model letter IHCP

Model letter inviting parents/carers to contribute to Individual Health Care Plan development

Dear Parents/Carers

Developing an Individual Health Care Plan for your Child

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting students at school with medical conditions, for your information.

A central requirement of the policy is for an Individual Health Care Plan (IHCP) to be prepared, setting out what support each student needs and how this will be provided. IHCPs are developed in partnership with the school, parents/carers, students, and the relevant health care professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although IHCPs are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's IHCP has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will include add details of team. Please let us know if you would like us to invite another medical practitioner, health care professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached IHCP template and return it, together with any relevant evidence, for consideration at the meeting. I or add name of other staff lead would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours faithfully

DD/MM/YYYY

Mr and Mrs X
Address
BRAINTREE
Essex CM77
7XX

Dear Mr and Mrs X

Individual Health Care Plan (IHCP)

Please find enclosed, a copy of a draft IHCP for X.

Can I please ask you to check the details of the plan carefully to ensure all of the information we have on file is correct. If you are happy with this plan, please sign the disclaimer on page 3 of the IHCP, and return the plan to us.

Alternatively if you wish to make changes to the plan, you can either telephone me directly on 01376 556324, email me on (XX) or simply make amendments on the form and return it as soon as possible. The amended plan will then be returned to you for approval.

If you have any questions regarding this plan, please do not hesitate to contact me.

Yours sincerely

Medical Administrator